



ARTIST DETAILS

Artist's First Name _____ Last Name _____

Artist's Date of Birth (dd / mm / yyyy) _____

Artists Cultural Background _____

Artists Email Address _____

Artist's Postal Address _____

Artist's Telephone Number _____

Parent or Guardian Telephone Number _____

Parent or Guardian Telephone Number _____

ARTWORK DETAILS

Name or Title of Artwork _____

150 Word Summary of Artwork _____

CONSENT

If under 18, Parent or Guardian consent has been given to enter

I consent to my artwork being included in the STTARS exhibition opening night on June 23rd 2023 and displayed on STTARS website and social media platforms

I consent to my artwork possibly being included in an exhibition during the 3rd Australia and New Zealand Refugee Trauma Recovery in Resettlement Conference

I agree that:-

- This is an original artwork/writing piece by the entrant
- The Artist currently resides in South Australia
- The Artist identifies as having lived experienced as a refugee or asylum seeker (this can include a family member)